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<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>10/669,572-Conf. #5629</td> </tr> <tr> <td>Filing Date</td> <td>September 25, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Tetsuya SAWANO</td> </tr> <tr> <td>Examiner Name</td> <td>A. H. Luong</td> </tr> <tr> <td>Art Unit</td> <td>2427</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0879-0416P</td> </tr> </table>		Application Number	10/669,572-Conf. #5629	Filing Date	September 25, 2003	First Named Inventor	Tetsuya SAWANO	Examiner Name	A. H. Luong	Art Unit	2427	Attorney Docket No.	0879-0416P
Application Number	10/669,572-Conf. #5629														
Filing Date	September 25, 2003														
First Named Inventor	Tetsuya SAWANO														
Examiner Name	A. H. Luong														
Art Unit	2427														
Attorney Docket No.	0879-0416P														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT (\$) 1,800.00															

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)														
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)															
Utility	330	165	540	270	220	110															
Design	220	110	100	50	140	70															
Plant	220	110	330	165	170	85															
Reissue	330	165	540	270	650	325															
Provisional	220	110	0	0	0	0															
2. EXCESS CLAIM FEES																					
							Small Entity														
							Fee (\$)														
Each claim over 20 (including Reissues)							52														
Each independent claim over 3 (including Reissues)							220														
Multiple dependent claims							390														
							195														
<table style="width: 100%;"> <tr> <td><u>Total Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td><u>Multiple Dependent Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>8</td> <td>- 20 or HP</td> <td>x</td> <td>=</td> <td></td> <td></td> <td></td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	8	- 20 or HP	x	=				
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>															
8	- 20 or HP	x	=																		
HP = highest number of total claims paid for, if greater than 20.																					
<table style="width: 100%;"> <tr> <td><u>Indep. Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>2</td> <td>- 3 or HP</td> <td>x</td> <td>=</td> </tr> </table>							<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	2	- 3 or HP	x	=							
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2	- 3 or HP	x	=																		
HP = highest number of independent claims paid for, if greater than 3.																					
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																	
	- 100 =	/50 =	(round up to a whole number) x	=																	
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							810.00														
1253 Extension for response within third month							990.00														

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,439
Name (Print/Type)	D. Richard Anderson		Telephone (703) 205-8035
			Date November 25, 2008